RESEARCH HIGHLIGHT

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WOMEN OFFENDERS: CHARACTERISTICS, NEEDS AND IMPACTS OF TRANSITIONAL HOUSING

INTRODUCTION

This study, completed under the CMHC External Research Program, examined the personal characteristics, housing and housing-related needs of women offenders and the importance of post-prison transitional housing in helping women offenders successfully reintegrate into the community. Transitional housing has, as its main goal, preparation for successful community integration and living.

METHODOLOGY

There were three parts to this research project:

- a longitudinal study which compared criminal justice, housing, health and other outcomes of a small group of women who had received transitional post-prison housing with women who had not received this type of housing support;
- a literature review which examined the characteristics of women offenders, their housing and housing-related needs, and the impacts of being involved in post-prison transitional housing; and
- a survey of seventeen key respondents working with women offenders in the Vancouver region which identified the housing-related needs of women offenders and the housing services available to them.

The longitudinal comparison study involved:

- women who resided at Pathways, a nine-unit transitional housing program for women who have left the custodial environment (prison and parole facilities) and who require assistance with reintegration in order to successfully function in the community; and
- a comparison group drawn from residents of Columbia House, a community residential facility for women on parole that offers some support, counselling and assistance and that is staffed on a 24-hour basis.

Both Pathways and Columbia House are managed and staffed by the Elizabeth Fry Society of Greater Vancouver. The goal of Pathways is to provide stable, transitional, safe, secure and flexible housing, supportive programs and counselling for high risk women offenders in order to increase their ability to live independently and to assist in their social integration into the community so that they do not commit further crimes or return to prison. Columbia House provides individual support, goal planning and program referrals, but is not considered transitional housing.

The characteristics of women offenders that were examined included:

- criminal practice background and incarceration history;
- mental and physical health status;
- the use of the health care system–particularly the use of stable versus emergency health services;
- history and changes to income and employment patterns;
- substance use and misuse;
- mental health issues;
- history of education and employment training;

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- duration, safety and stability of housing;
- food intake, food sources and nutritional status;
- quality and stability of family relationships;
- involvement in and knowledge of the community;
- quality of life and self-assessment of confidence and worth.

A set of comprehensive interviews were conducted to collect information about the status of the women prior to incarceration, at the first research contact stage post-incarceration (September 2003) and 6-12 months later. The interviews were lengthy and were done in person or by telephone. The pre-incarceration and September 2003 data were collected at the same interview.

Eight Pathways participants participated in the baseline and first interview; seven in the final interview. Nine women from Columbia House were involved in the first two interviews; seven women completed the final interview.

The Pathways and comparison group participants were similar in terms of age, number of children and ethnic background. Three women in the study were from ethnic minorities, including two Aboriginal women. It is well known that there is a disproportionate number of Aboriginal women in the Canadian prison population.

This methodology had some limitations:

- the sample size for both groups was small;
- there were difficulties tracking and retaining subjects in the study;
- the duration of stay for residents at Pathways was longer than expected, making the assessment of community outcomes difficult;
- the comparison group had also received housing and some level of program support during their stay at Columbia House which averaged approximately 6 months;
- the baseline data for the study was based on each woman's recall of her status and situation prior to her incarceration, so its quality may have been affected by the time lag.

FINDINGS

Findings from the comparison study, the literature review and the key respondent survey are consistent as to the characteristics of women offenders.

The literature review found that research on women offenders has been limited due to the relatively small proportion of women in the criminal justice system and the fact that women are less likely to commit serious violent crimes. The literature that does exist indicates that women offenders are seriously disadvantaged in most aspects of their lives. On every significant measure women offenders have serious personal barriers that limit their successful re-integration into the community after prison. A majority have complex histories of physical and sexual abuse and serious general health, mental health and addiction problems. Many are single parents, have limited education or employment skills, are isolated and lack family support.

The educational status for most of the women in this study was low: only about half (9/17) had completed grades 8-10. Many had extensive criminal backgrounds, low levels of employment and had experienced a high degree of housing instability. Almost half the women had moved 6 to 10 times in the last five years. Six of the seventeen women said they had spent periods of one to eighteen months prior to incarceration living with others ("couch surfing"). Most rated the condition, safety and cleanliness of their housing prior to their last major incarceration in the low to moderate range.

Most of the Pathways and half of the comparison group described themselves as having serious health problems prior to incarceration. All the women in the Pathways group defined their health as poor. The major health problems cited were Hepatitis C, drug addiction, depression/anxiety and malnutrition. Most (6/8) of the Pathways women described themselves as severely underweight at pre-incarceration. Almost all (7/8) Pathways and most (5/9) comparison group members said they had problems affording food for substantial periods of time. Few of the women prepared their food at home: 12 out of 17 ate at community food programs or restaurants, or ate only snack food. Most of the women lacked stable housing in which to prepare food, and few had food purchase and food preparation skills.

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Half (4/8) of the Pathways and some (2/9) comparison group members described themselves as having been diagnosed prior to incarceration with mental health disorders, anxiety or depression. As the study progressed, more women were diagnosed with mental health problems such as post-traumatic stress disorders. The increased level of diagnoses was probably due to continuing contacts with services or the justice system where these issues may be identified.

Almost all (16/17) participants in both groups described themselves as having serious alcohol and drug misuse problems at the pre-incarceration stage.

At the pre-incarceration stage, the family and personal relationships of women in both groups were very poor. Only four out of seventeen women described their family relationships as good, and the circle of reliable friends each woman described as being able to call upon was small: only 1.3 contacts for the Pathways group.

The women in the two groups were also relatively infrequent users of health care services. Only four out of seventeen women described themselves as seeing a family doctor regularly and none visited a dentist on a regular basis. Despite serious drug or alcohol problems described by most of the participants, only two women frequently visited a needle exchange.

In terms of self and life assessment no woman in either group described her life as moving forward in a positive direction at pre-incarceration. Most felt very hopeless, and that they were not persons of worth and value.

The changes in these characteristics measured at the final interviews were, in most cases, modest. As mentioned above, the sample sizes were too small for the findings to be considered conclusive, and, in some cases, positive changes were also seen in the comparison group, perhaps because comparison group members had received some counselling and program support during their stay at Columbia House.

The most significant improvements in the Pathways group, in comparison to the Columbia House group, were:

- a lack of subsequent criminal charges or returns to custody,
- an increase in stable, non-transient, safe and secure housing,
- improvements in health and nutritional status, including an increased ability to prepare food at home and fewer mental health disorders,
- reduced levels of self-described drug/alcohol misuse,
- a slightly higher involvement in specific job training programs,
- fewer problems finding a place to sleep at night.

Levels of income *decreased* for both groups during the study (possibly due to less reliance on illegal forms of income), but there was a significant improvement in the number and frequency of personal and family contacts in both groups. There were also improvements in feelings of self-worth and a sense of hopefulness in both groups. However, at the final interview, almost half (3/7) of the Pathways participants still felt that they had problems making decisions or lacked sufficient skills to handle life well.

Pathways participants rated the value of Pathways very highly (6.9 out of a possible scale of 7) at the first interview. This rating dropped to 5.9 at the final interview after most women had left the facility. Despite this reduced rating, all of the women had favourable comments about the value of Pathways in terms of their successful adjustment to, and reintegration into, the community. These comments stressed the value of the flexibility of the program, acceptance and support from staff, the provision of specific services, and a safe and secure environment.

CONCLUSIONS

Safe, private, secure and stable transitional housing is critical for women who are leaving prison and re-entering the community. These women typically lack money, family support, life skills, and identification papers, and suffer acute and chronic general and mental health problems as well as addiction when leaving prison. Most have childcare responsibilities. Program supported housing is a priority if re-offending is to be avoided.

It was impossible to differentiate the relative value of stable housing provided by Pathways and the staff support provided by the program. The burden of issues and problems experienced by most women offenders suggests that program support and counselling needs to be delivered in conjunction with transitional housing. Without the provision of stable and safe housing, it is doubtful whether their physical and mental health, addictions, relationships, and community reintegration issues can be addressed.

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